

POSITION	INITIALS	ID NO.	DATE
FEES DETERMINATION	AT		
O.I.P.F. CLASSIFIER		16	1-14-99
FORMALITY REVIEW	M	67479	1-21-99 4-15-99

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 — (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Date
1	1/3/99
2	1/1/99
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4	✓
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10	✓
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25	✓
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Claim	Date
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Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here